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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instr		Office use only
1. NAME OF COMMITTEE (in	(Check if nam is changed)	e Example: If typying, type over the lines	12FE4M5
	Republican Party, Inc.		
ADDRESS	5019 MacCorkle	Avenue SW	
ADDRESS (number and	street)		
(Check if addition is changed)	South Charlesto	n	WV 25309 _
		CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA			
twaxman@ma	i.rr.com 		
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
COMMITTEE'S FAX I	NUMBER		
با لبنا			
2. DATE M. 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	ATION NUMBER	C C00417063	
4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)			
I certify that I have exam	ined this Statement and to the best of m	y knowledge and belief it is true, correc	t and complete
Type or Print Name of	Treasurer Theresa Wax	man	
Signature of Treasure	Electronically Filed by There	sa Waxman	Date 09 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	·	n may subject the person signing this S	Statement to the penalties of 2 U.S.C. S437g.
Office Use Only		For further informatic Federal Election Comm Toll Free 800-424-953	mission FEC FORM 1

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5.	TYPE OF COMMITTEE (Check One)			
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)			
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	Name of Candidate			
	Candidate Party Affiliation Office Sought: House Senate President	State State District		
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate			
(d) X This committee is a STA (National, State (or subordinate) committee of the Republican,etc.)				
	(e) This committee is a separate segregated fund (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.			
6.	Name of Any Connected Organization or Affiliated Committee			
L				
L				
	Mailing Address			
CITY▲ STATE ▲ ZIP CODE				
	Relationship			
	Type of Connected Organization:			
	Corporation Corporation w/o Capital Stock Labor	Organization		
	Membership Organization Trade Association Coope	rative		

Write or Type Committee Name			Page 3		
West Virginia Republican Pa	rty, Inc.				
 Custodian of Records: Identify possession of Committee book 	by name, address, (phone number os and records.	optional), and position of th	e person in		
Full Name					
Mailing Address					
Title or Position ♥	CITY A	STATE▲	ZIP CODE A		
		Telephone number			
name and address of any desig	Freasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).				
Full Name of Treasurer Theresa Wa	xman				
Mailing Address	RT 1 Box 352				
	Clarksburg		26301		
Title or Position ♥	Clarksburg CITY ▲	WV			
Title or Position ♥	CITY A		26301		
Title or Position ♥	CITY A	STATE	26301 ZIP CODE ▲		
Title or Position ♥ Full Name of Designated	CITY A	STATE	26301 ZIP CODE ▲		
Title or Position ♥ Full Name of Designated Agent	CITY A	STATE	26301 ZIP CODE ▲		

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts safety deposit boxes or maintains funds. Name of Bank, Depository, etc.			
		ne Huntington National Bank P.O. Box 1558 EA1W37		
	Mailing Address			
		Columbus	43216 _ 9753	

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$

CITY 🗷

Corporation

Membership Organization

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Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, e	tains funds.	ts funds, holds accounts, rents
J.P.	Morgan Chase Bank	
Mailing Address	Ohio/West Virginia Markets	
	P.O. Box 260180	
	Baton Rouge L	70826 _ 0180
	CITY △ STA	TE 🖆 ZIP CODE 🛕
Name of Any Connected (Organization or Affiliated Committee	[ADDITIONAL]
Mailing Address		
	CITY▲ STA	ATE ▲ ZIP CODE ▲
Relationship		
Type of Connected Organiz	ation:	

Corporation w/o Capital Stock

Trade Association

Labor Organization

Cooperative

Designated Agent			[ADDITIONAL]
Full Name Mailing Address			
Title or Position ♥	CITY A		ZIP CODE A
	т	elephone number	